

THE ENCLAVE IN FLAGSTAFF

COMPLAINT FORM

First and Last Name of person who
observed the violation:

Lot number or address of person who
observed the violation:

Address of the property allegedly in
violation of the Association's governing
documents:

☐ N/A – LOCATION: _____

Date(s) the violation occurred:

Nature of the violation:

Are you sending supporting evidence along with this form?

☐ No ☐ Yes Evidence: _____

The person complaining of the alleged violation must state their first and last name and this information *may* be shared with the party who is accused of the violation.

Signature of Observer: _____ Date: _____

cc: Owner file

REV 06/16